Report Date: 02 Feb 2013

Summary Report for Individual Task 081-833-0161 CONTROL BLEEDING Status: Approved

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Condition: You have encountered a casualty who is bleeding externally and may also be bleeding internally. All other more serious injuries have been assessed and treated. Body substance isolation precautions have been taken. You will need field dressings, emergency bandages, cravats, gauze pads, gauze roller bandage, sterile dressing, Kerlix, ace wraps, air splints, hemostatic bandage, windlass device, materials for a tourniquet, and DD Form 1380 (Field Medical Card (FMC)). You are not in a CBRNE environment. This task should not be trained in MOPP.

Standard: Control bleeding without further harming the casualty.

Special Condition: None

Special Standards: None

Special Equipment: None

MOPP: Never

Task Statements

Cue: None

DANGER

None

WARNING

None

CAUTION

None

Remarks: None

Notes: None

Performance Steps

- 1. Determine if the bleeding is external or internal.
 - a. External bleeding (go to step 2).
- b. Internal bleeding--suspicion should be based on mechanism of injury (MOI). (See tasks 081-833-0047, 081-833-0062, 081-833-0064, and 081-833-0154.)
 - (1) Large bruises on the trunk or abdomen indicating injury to underlying organs.
 - (2) Painful, swollen or deformed extremities indicating underlying fractures.
 - (3) Rigid and/or tender abdomen may indicate bleeding into the abdomen.
 - (4) Bleeding from the mouth, rectum, or other body orifice.
 - (5) Vomiting bright red or dark (like coffee grounds) blood (hematemesis).
 - (6) Bloody stool that is dark and tarry (melena) or bright red (hematochezia).
- 2. Apply direct pressure to the wound with a gauze pad or field dressing.

Note: If bleeding is profuse, apply direct pressure to the wound with your gloved hand. Do not waste time looking for a dressing.

NOTE: If in a tactical environment. (See task 081-833-0213.)

CAUTION

Do not elevate if there are suspected musculoskeletal injuries, impaled objects in the extremity, or any suspected spinal injury.

3. Elevate the affected extremity above the level of the heart.

CAUTION

Once bleeding has been controlled it is important to check a distal pulse to make sure that the dressing has not been applied too tightly. If a pulse is not palpable, adjust the dressing to reestablish circulation.

- 4. Apply a pressure dressing or emergency bandage if the wound continues to bleed. (See task 081-833-0212.)
- 5. Locate and apply pressure to the appropriate arterial pressure point, if the wound continues to bleed.

Note: Pressure points may not be effective if the wound is at the distal end of the limb. Blood is being sent to these areas from many smaller arteries.

- a. Brachial artery--used to control bleeding from the distal end of an upper extremity.
 - (1) Hold the casualty's arm out at a right angle to his body with the palm facing up. Note: Do not use force to raise the arm if the movement causes pain.
 - (2) Locate the groove between the humerus and the biceps muscle.

- (3) Hold the upper arm in the palm of your hand with your fingers positioned in the medial groove.
- (4) Press your fingers into the groove to compress the artery against the underlying bone.
- b. Femoral artery--used to control bleeding of a lower extremity.
 - (1) Locate the femoral artery on the medial side of the anterior thigh, just below the groin.
 - (2) Place the heel of your hand over the site and apply pressure toward the bone.
- 6. Consider other conjunctive therapies to control bleeding if necessary.
 - a. Splinting. (See task 081-831-0044.)
 - b. Hemostatic bandage. (See task 081-833-0211.)
- 7. Apply a tourniquet if the wound continues to bleed. (See task 081-833-0210.)
- 8. Initiate treatment for shock as needed. (See task 081-833-0047.)
- 9. Record treatment given on the FMC.
- 10. Evacuate the casualty.

(Asterisks indicates a leader performance step.)

Evaluation Preparation:

PERFORMANCE MEASURES	GO	NO-GO	N/A
Determined the type of bleeding (external or internal).			
2. Applied direct pressure to the wound with a gauze pad or field dressing.			
3. Elevated the extremity above the level of the heart.			
4. Applied a pressure dressing or emergency bandage if the wound continued to bleed.			
5. Located and applied pressure to the appropriate arterial pressure point, if the wound continued to bleed.			
6. Considered other conjunctive therapies to control bleeding if necessary.			
7. Applied a tourniquet if the wound continued to bleed.			
8. Initiated treatment for shock.			
9. Recorded treatment given on the FMC.			
10. Evacuated the casualty			

Supporting Reference(s):

Step Number	Reference ID	Reference Name	Required	Primary
		AAOS, Emergency Care and Transportation of the Sick and Injured, 9th Edition, Jones & Bartlett Publishers	No	No
	DD FORM 1380	US Field Medical Card	Yes	No
	PHTLS	NAEMT, PHTLS: Basic And Advanced Prehospital Trauma Life Support (Military Version), 5th Edition, Mosby- Year Book (ISBN: 0-32303-271-0)	No	No

Environment: Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT.

Safety: In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination. In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination.

Prerequisite Individual Tasks: None Supporting Individual Tasks: None Supported Individual Tasks: None

Supported Collective Tasks:

Task Number	Title	Proponent	Status
08-2-0319	Provide Ground Ambulance Evacuation Support	08 - Medical (Collective)	Approved
08-2-0003(Step: 3.)	Treat Casualties	08 - Medical (Collective)	Analysis
08-2-9005(Step: 4.)	Perform Tactical Aeromedical Evacuation Support Activities	08 - Medical (Collective)	Approved
08-1-0231(Step: 2.)	Provide Emergency Medical Services	08 - Medical (Collective)	Approved
08-2-0003(Step: 3.)	Treat Casualties	08 - Medical (Collective)	Approved
08-5-8100(Step: 5.)	Provide Medical Treatment Team/Section Support	08 - Medical (Collective)	Approved
08-3-0316(Step: 1.)	Provide Sick Call Services	08 - Medical (Collective)	Approved
08-3-0313(Step: 1.)	Provide Emergency Medical Treatment Non-Medical Units	08 - Medical (Collective)	Approved
03-5-1014	Establish Civil Support Team (CST) Medical Support	03 - CBRN (Collective)	Approved
08-5-8100(Step: 4.)	Provide Medical Treatment Team/Section Support	08 - Medical (Collective)	Approved
08-3-0319(Step: 5.)	Provide Ground Ambulance Evacuation Support	08 - Medical (Collective)	Approved

08-3-0319(Step: 2.)	Provide Ground Ambulance Evacuation Support	08 - Medical (Collective)	Approved
08-3-0319(Step: 1.)	Provide Ground Ambulance Evacuation Support	08 - Medical (Collective)	Approved
08-2-0316	Provide Sick Call Services	08 - Medical (Collective)	Approved
08-2-0313(Step: 1.)	Provide Emergency Medical Treatment Medical Units	08 - Medical (Collective)	Approved
08-2-9005(Step: 4.)	Perform Tactical Aeromedical Evacuation Support Activities	08 - Medical (Collective)	Analysis
08-2-8100(Step: 4.)	Provide Battalion Aid Station Support	08 - Medical (Collective)	Approved
08-2-8100(Step: 5.)	Provide Battalion Aid Station Support	08 - Medical (Collective)	Approved
08-null- 0000(Step: 4.)	Perform Tactical Aeromedical Evacuation Support Activities	08 - Medical (Collective)	Proposed

ICTL Data:

ICTL Title	Personnel Type	MOS Data
91W - Health Care Specialist - SL1		
68W - Health Care Specialist - SL1	Enlisted	MOS: 68W, Skill Level: SL1
91X - Mental Health Specialist - SL1		